FIRST SET OF INTERROGATORIES TO DEFENDANT, ZELMIRA QUINONEZ

 Please state your full name, all aliases and names by which you have been known, all addresses at which you lived during the past five years, your date of birth, and your social security number:

Zelmira Quinonez

D.O.B: 9/24/50

15626 SW 19 Street, Miami, FL 33185

Last four digits of SSN: 0809

2. Please state whether you have ever been charged with a crime, and, if so, please state the nature of each such charge, the County and State in which each was brought, the disposition of each such charge, and the case number(s) for each:

Never.

None.

- 3. Please identify by name, address and telephone number, any person who has or may have knowledge of any relevant facts or discoverable matter relating to the subject of this lawsuit, including the claims and defenses asserted, and state the substance of the knowledge that you believe or have reason to believe each of these persons may have.
 Myself and Maricela Portal. Maricela will testify that Plaintiff worked much less than the hours Plaintiff claims and did not work for the length of time Plaintiff claims.
- Identify your position with Amor de Jesus, Corp. and describe your daily activities for Amor de Jesus, Corp. from February 1, 2020, to August 8, 2023:
- 5. Identify your position with Sweet Living Facility Inc. and describe your daily activities for Sweet Living Facility Inc. from February 1, 2020, to August 8, 2023:

President:

I supervise the employees, verify medication and health needs of residents, do maintenance for location, coordinate with health care providers, and food.

6. If you contend that you did not supervise, hire, or manage Plaintiff in her work at Amor de Jesus, Corp. then please identify each person who did by name, address, telephone number, and each such person's position with Amor de Jesus, Corp. during this same timeframe, and then each such person's current employment/work status with Amor de Jesus, Corp

Aminta Quinonez was the person who supervised.

7. If you contend that you did not supervise, hire, or manage Plaintiff in her work at Sweet Living Facility Inc. then please identify each person who did by name, address, telephone number, and each such person's position with Amor de Jesus, Corp. during this same timeframe, and then each such person's current employment/work status with Amor de Jesus, Corp.

I hired and supervised.

 Please identify each contract, lease, and agreement you signed on behalf of Amor de Jesus, Corp. and the current custodian of each such document.

None.

Please identify each contract, lease, and agreement you signed on behalf of Sweet Living
Facility Inc. and the current custodian of each such document.

Lease Agreement, Vendor Agreement, and Utilities (Water/ Electrics)

10. Please identify your role in processing payroll, signing checks, paying cash, and/or paying through direct deposit, ETF, Venmo, Zelle, and/or CashApp as well as hiring and

firing decisions on behalf of Amor de Jesus, Corp., during the three years prior to the filing of the Complaint in this case.

None.

11. Please identify your role in processing payroll, signing checks, paying cash, and/or paying through direct deposit, ETF, Venmo, Zelle, and/or CashApp as well as hiring and firing decisions on behalf of Sweet Living Facility, Inc., during the three years prior to the filing of the Complaint in this case.

I was responsible for all aspects of hiring, firing, and paying Plaintiff.

12. Please state if you have ever been named as a Plaintiff, Defendant, or witness in a lawsuit and, if so, then please state the nature of the claim, identify whether you were a Plaintiff, Defendant, or witness, whether you gave a deposition, the case number and jurisdiction of each such claim, and the outcome.

Never.

13. Please identify all conversations you had with Plaintiff regarding her hiring, her pay, her hours worked, and/or her job duties/responsibilities during the three years before the filing of the Complaint in this case:

I advised her that I would call her whenever we needed her to work. When I would call her, we would pay her \$90 per a 6-hour day.

14. Please identify each bank account for Amor de Jesus, Corp. of which you are a signatory and identify each other signatory during the time period during which Plaintiff worked for Defendants:

None.

15. Please identify each bank account for Sweet Living Facility, Inc. of which you are a signatory and identify each other signatory during the time period during which Plaintiff worked for Defendants:

Chase checking account.

ZELMIRA OUNONEZ

STATE OF FLORIDA

: SS.

COUNTY OF Micani Dode

Before me, the undersigned authority personally appeared ZELMIRA QUINONEZ who, after being duly sworn, states under oath that the foregoing Answers to First Set of Interrogatories on are true and correct.

SWORN TO AND SUBSCRIBIED before me this $\underline{\mathcal{S}}$ day of $\underline{\mathcal{FebMay}}$, 2024, and who is $[\underline{\ }]$ personally known by me or $[\underline{\ }]$ who produced $\underline{\ }$ $\underline{\ }$ $\underline{\ }$ $\underline{\ }$ as identification.

Signature Notary Public - State of Florida

Print Name: Alln Chest

My Commission Expires: 320 25

AILIN CANALS PEREZ
Commission # HH 098754
Expires March 20, 2025
Bonded Thru Troy Fain Insurance 800-385-7019